

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Democratic Senatorial Campaign Committee		FEC IDENTIFICATION NUMBER C00042366	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name of Payee Great American Media		Date of Public Distribution/Dissemination 10 / 04 / 2014	
Mailing Address 3050 K St. NW Suite 100		Amount 15011.89	
City Washington State DC Zip Code 20007		Transaction ID : SE-96842 Date of Disbursement or Obligation 10 / 06 / 2014	
Purpose of Expenditure Media Production Estimate		Category/Type	
Name of Federal Candidate Thomas Cotton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought 3489016.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Full Name of Payee Ralston Lapp Media		Date of Public Distribution/Dissemination 10 / 04 / 2014	
Mailing Address 1054 31st Street, NW Suite 430		Amount 4393.02	
City Washington State DC Zip Code 20007		Transaction ID : SE-96843 Date of Disbursement or Obligation 10 / 06 / 2014	
Purpose of Expenditure Media Production Estimate		Category/Type	
Name of Federal Candidate Jonl K. Ernst		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 5171559.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures.....		19404.91	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Megan Mielnik		Date 10 / 06 / 2014	

FEC Schedule E (Form 24/28) Rev. 09/2013

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 2 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Democratic Senatorial Campaign Committee	FEC IDENTIFICATION NUMBER C00042366
---	--

Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report	<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on
---	--

Full Name of Payee Dixon/Davis Media Group LLC		Date of Public Distribution/Dissemination 10 / 04 / 2014	
Mailing Address 1028 33rd Street, NW Ste 300		Amount 15810.00	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-88840
Purpose of Expenditure Media Production Estimate	Category/ Type	Date of Disbursement or Obligation 10 / 06 / 2014	
Name of Federal Candidate William Cassidy	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: 00 State: LA
Calendar Year-To-Date Per Election for Office Sought	2397839.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name of Payee Great American Media		Date of Public Distribution/Dissemination 10 / 04 / 2014	
Mailing Address 3050 K St. NW Suite 100		Amount 2188.37	
City Washington	State DC	Zip Code 20007	Transaction ID : SE-98841
Purpose of Expenditure Media Production Estimate	Category/ Type	Date of Disbursement or Obligation 10 / 08 / 2014	
Name of Federal Candidate Thom R. Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought	4730011.49	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17796.37
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures.....	37201.28

Under penalty of perjury I certify that the Independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Megan Mielnik

Signature

Date

10 / 06 / 2014

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX Machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	
N/A PREPARER (8/2013)	N/A DATE PREPARED